

this information, it is troubling that according to recent studies, the quality of child care is rated mediocre to poor.

In many cases, parents are able to use relatives. But such care is not always available or preferable. Often there are no relatives living close by, or nearby relatives are working or are unable to meet the demands of a caregiver for a young child.

In recent times, businesses have made efforts to help their employees find and pay for child care, but such help is still scarce. Businesses account for only 1 percent of the total child care expenditures.

In January, President Clinton announced a historic initiative to improve child care for America's working families. The initiative proposes \$21.7 billion over 5 years for child care to help working families pay for child care, build a good supply of after-school programs, improve safety and quality of care and promote early learning. This initiative is an important start to our providing new resources and building on existing State efforts to address child care trends.

Now it is up to my colleagues here in Congress to strengthen this proposal and enact a child care package that ensures quality, affordable child care for every family who needs it. Last month the First Lady, Hillary Rodham Clinton, visited a child care center in my district. During her tour of the center, Mrs. Clinton was able to learn more about the relationship-centered child care model. This nationally acclaimed model of care employs the unique concept of small, family groups of children who are with the same teacher over time so that they grow with better reading, math, language and interpersonal skills.

I believe that relationship-centered child care has the potential to be the benchmark for child care in America. It is my hope that the model program will expand to include more of America's children and families.

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STOP PLAYING POLITICS WITH SENIORS' HEALTH CARE

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Georgia (Mr. KINGSTON) is recognized for 5 minutes.

Mr. KINGSTON. Mr. Speaker, Mrs. Lucille Harris lives in the First District of Georgia. She is 69 years old. For the past 3 years she has been somewhat worried about her health care, affectionately known as Medicare, because she knows that in April of 1995 the Medicare trustees said Medicare is going bankrupt and that Congress needed to act to preserve and protect it. We tried for many years to protect it and preserve it; but, unfortunately, politics got in the way.

Then, last year, we finally came up with a bipartisan solution which the House passed, the Senate passed and

the President signed into law. We did do some good Medicare reform. We gave our seniors a choice of plans. We cut fraud and abuse. We increased spending from \$5,000 to \$7,000 per person.

In addition to that, we said that States are required to cover people who have fallen through the cracks; to come up with something for people who were not Medicare-eligible, like the 51-year-old man from Vermont that I talked to last night; people who cannot get coverage through the standard health care market. The bill required that States come up with plans, each State, to protect these people.

The second thing that it did along that line is it said that we would set up a bipartisan Medicare committee; and the bipartisan committee, which is chaired by a Clinton-appointed Democrat Senator, would address the long-term solvency needs of Medicare as more and more baby boomers retire and use this coverage. We decided it was more important to protect Medicare for the next generation, not just the next election.

So, Mr. Speaker, having made this great and difficult bipartisan progress, why is it that the President has now ignored that legislation and his own commission? Why is he willing to risk Medicare because of election year politics? Why is it that if it is profitable to lower Medicare eligibility and it does not cost the system, why is it the private sector is not already providing that coverage?

Mr. Speaker, I am afraid the President is again playing politics with our seniors' very important health care plan. We need to protect and to preserve it. We do not need to play politics with it. Medicare deserves bipartisan support. People like Mrs. Harris and millions and millions of Americans, perhaps one's mother or father or grandparents, they deserve better.

Mr. President, do not monkey around with our seniors' health care. Let us continue to work on a bipartisan basis to protect Medicare. Let us see what the bipartisan commission with the President's chairman has to say before we go changing the plan and incurring unnecessary risks to our seniors' health care plan.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (Mr. FOLEY). Members are reminded to address their remarks to the Speaker and not to the President.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. SHERMAN) is recognized for 5 minutes.

(Mr. SHERMAN addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gen-

tleman from Maryland (Mr. BARTLETT) is recognized for 5 minutes.

(Mr. BARTLETT of Maryland addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Guam (Mr. UNDERWOOD) is recognized for 5 minutes.

(Mr. UNDERWOOD addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Connecticut (Ms. DELAURO) is recognized for 5 minutes.

(Ms. DELAURO addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

THE AMERICA AFTER SCHOOL ACT

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New York (Ms. SLAUGHTER) is recognized for 5 minutes.

Ms. SLAUGHTER. Mr. Speaker, experts estimate that nearly 5 million school-age children in the United States spend time without adult supervision during a typical week. Too many of these unsupervised children hang out on the street, exposed to drugs and crime, or sit at home with only the television set for company. I recently introduced the America After School Act, H.R. 3400, to expand high quality after-school programs for 5- to 15-year-old students to give these kids a safe place to go when the school day ends.

In 64% of families with children under 18, both parents work. A recent study showed that when children were unsupervised for long periods of time early in life, they were more likely to display poor behavior adjustment and academic performance as early as the sixth grade. Clearly, we no longer live in the time of Ward and June Cleaver. Young people today need productive, supervised activities for the periods when they are not in school.

In my district of Rochester, NY, Henry Lomb School #20 has an after school program that serves about 25 students. They could easily triple this number, based on their waiting list and space availability, if only they had enough funding to increase their staff to meet the one-to-ten staff-student requirement.

Meanwhile, Adlai Stevenson School #29 has an after school program that has enough funding to serve sixteen of its students. This is a great start. However, the school has four hundred students. This is another example of the great need to expand after school child care in this country.

Other schools in my district report the need for increased funding for transportation, staff, and supplies to provide supervision and constructive activities for school-age children when the school day ends. Because of the lack of funding, schools do not have the resources to provide after-school care for all students every day. They ration the care—two or three days per week for each student. However, a study in my district showed that school attendance was higher on days when students knew they had their after-school program at